

NEGOTIATOR'S SUMMARY REPORT

STATE PROJECT NO. _____ PARCEL NO. _____

F.A.P. NO. _____ OWNER _____

PROJECT NAME _____ (Use "List of Owners" Form for multiple owners)

_____ MARITAL STATUS: _____

_____ AGE _____ RACE _____ DISABILITY? _____

ROUTE: _____ MAILING ADDRESS: _____

PARISH: _____

NOTE: All blanks must be completed even if not applicable (enter N/A)

DATE _____

_____ Assigned ownership for acquisition. Reviewed and checked package for compliance with all applicable rules, regulations, procedures and laws.

_____ Set up appointment: _____

_____ Telephone Number Home _____ Work _____

_____ Persons Contacted: _____

_____ Place of Contact: _____

_____ Other Persons Present: _____

_____ Type of Contact: _____

_____ Verified Ownership

_____ Offered a Brochure which was accepted _____ declined _____

_____ Discussed project and explained R/W and construction plans.

_____ Presented offer and delivered Just Compensation Letter

_____ Just Compensation Amount _____

_____ Land _____ Improvements _____ Damages _____

_____ Delivered copy of the acquisition instrument

_____ Explained the LA DOTD policies on non-discrimination and reimbursement of incidental expenses pursuant to title transfer along with procedures for appeal.

_____ Discussed mortgage procedures and advised owner of requirements even if no mortgage certificate was ordered

_____ Explained the LA DOTD policy on expropriation

_____ Presented alternate acquisition offers. Uneconomic Remainder _____

_____ Retention _____ Adversely impacted _____ Other _____

_____ Presented revised offer and delivered revised Just Compensation Letter

_____ Just Compensation Amount _____

_____ Land _____ Improvements _____ Damages _____

_____ Discussed Relocation Assistance Benefits and / or offers

_____ Was Counter Offer made? _____ Amount _____ Dist. Acct./rec. _____

_____ Discussion: (Emphasize the owner's dialogue, especially regarding counter offers. Do not repeat the Department's presentation requirements covered in the above checklist.)

APPROVED: _____ SIGNED: _____

REAL ESTATE DISTRICT MANAGER TITLE: REAL ESTATE SPECIALIST

DATE: _____